PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003

107020623

CLAIMS AS FILED - PART I								SMALL E	NTITY		OTHER	R THAN
_			(Column 1)		(Column 2)		, '	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			39				·	RATE	FEE		RATE	FEE
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC FEI	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			39 minus 20=		• 19			X\$ 9=		OR	X\$18=	342
INDEPENDENT CLAIMS			7 minus 3 =		4			X43=		OR	X86=	344
MU	JLTIPLE DEPE	NDENT CLAIM P					+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in col						olumn 2		TOTAL	16	OR	TOTAL	1456
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)		(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	A	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 39	Minus	3	9	=		X\$ 9=	1	OR	X\$18=	
	Independent	· 2	Minus	***	Z	-		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
TOTAL ADDIT. FEE												
		(Column 1)		(Colum	າກ 2)	(Column 3)	^	DDII. FEE		•	ADDII. 1 CE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	LI IPLE DEF	ENDENT	CLAIM	<u> </u>		+145=		OR	+290=	
	•						L	TOTAL DDIT, FEE		OR ,	TOTAL ADDIT. FEE	
	•	(Column 1)		(Colum	n 2\	(Column 3)	A	JUII. FEE		•	ADDII. FEES	
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total '	*	Minus	**		= .	Г	X\$ 9=		OR	X\$18=	
	Independent	i	Minus	***		-		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		\vdash			ا ```		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290= TOTAL	
1	the "Highest Nu	nber Previously Pai nber Previously Paid ber Previously Paid	d For IN THIS	SPACE IS	less than	3, enter "3."		DIT. FEE L			DDIT. FEE	
'	ne rugnesi isum	DEL FIGHTAUDIY PAIN	TO LIVER OF	ocpeniue		myricae number		ar nua ahh		41 CON	· .	